



BOILER / PRESSURE VESSEL INSTALLATION OR REINSTALLATION PERMIT

PERMIT NUMBER:

INSTALLER / OWNER – Complete this section		
Installer / Contractor	Owner / Billing Location	Object Location
Name 1	Name 2	Name 3
Street	Street	Street
City, State, Zip	City, State, Zip	City, State, Zip
Contact Name	Contact Name	Contact Name
Phone	Phone	Phone
Fax	Fax	Fax
E-mail	E-mail	E-mail
Specific Object Location: 4		Type of Object: 5
I certify that the work to be performed under this notification will be done in accordance with the Boiler and Unfired Pressure Vessels Law RCW 70.79 and WAC 296-Chapter 104.		
Date 6	Installer name 7	Installer Signature 8

INSPECTOR – Complete this section Boiler/Pressure Vessel Information				
Jurisdiction #	Date of Inspect	PV or Boiler	NB Number	Serial / Other Nbr
Manufacturer		Year Built	Plant Location	Type of Vessel
MAWP		Vessel Size (Sq Ft / HS)	Number of SV	ASME Stamp
Inspection Freq (m)		Inspection Type	Issue Cert	SV Press SV Press 2
Verify 18" minimum clearance? WAC 296-104-255, 256, 260, 265, 270		Comments:		
Verify CSD-1 requirements WAC 296-104-265 (3)				
Date	Inspector's Name		Inspector's Signature	

For L&I use Only:	Permission is hereby given to do the above work, subject to compliance with the Boilers and Unfired Pressure Vessels Law RCW 70.79 and WAC 296-Chapter 104.	
Date Permit Issued	Expiration Date	Signature of Chief Boiler/Pressure Vessel Inspector

NOTE: The Owner is responsible for notifying Labor and Industries at (360) 902-5272 & 5273 & 5267 when inspections are needed. All inspection costs and fees will be the responsibility of the Owner.

THIS NOTICE SHALL BE POSTED BY THE VESSEL

INSTRUCTIONS FOR THE PREPERATION OF F620-032-000, BOILER/PRESSURE VESSEL INSTALLATION OR REINSTALLATION PERMIT

***INSTALLER/CONTRACTOR/OWNER fills out area 1 – 8**

NOTE: Installer/Contractor/Owner may be the same person.

- 1) “IF KNOWN” fill out the name, address, phone numbers, e-mail and contact name of the Installer/Contractor. If this information is the same as the owner or object location, you do not need to fill out this area.
- 2) Fill in the name, address, phone number, contact name and e-mail address of the “owner/billing location” where object is installed. (owner of object where billing is to be sent)
- 3) Fill in the name, address, phone numbers, contact mane, e-mail address of the “actual object location” (where object is installed, physical location)
- 4) “Specific Object Location” i.e.: hall closet east wing, room 123, ceiling over desk in conference room, janitors closet, boiler room building 2, etc. DO NOT put: new school, basement, gym, second floor etc. The Inspector needs to know exactly where the object is installed.
- 5) “Type of Object” i.e.: boiler, air tank, water heater, heat exchanger, co2 tank, storage tank, expansion tank, etc.
- 6) Date permit submitted to L & I
- 7) Print Installer/Owner name
- 8) Please sign form and either mail or fax to address/phone number on form.

Inspectors must fill out the rest of the form

All information is self-explanatory. The only item of concern is “Type of Vessel”. The only choices we have at this time in our “Jurisdiction on Line” system are the following.

AIR COND	CO2	EXP TK	SEPERATOR	FIRED COIL	PWR BLR
AMMONIA	DATK	FREON	STG TK	FTBLR	SOLARHWH
AT	DIGESTER	HEX	U	GWH	STMGEN
AUTOCLAVE	DRYER	HWH	WH	HOBBY BLR	VTBLR
CHILLER	ROLL	HWSTGTK	CIB	HW BOOSTER	WTBLR
CHLORINE	ECON	REFER	ELBLR	LPBLR	
	ELWH				

If you have any additional suggestions please e-mail us at mrod235@lni.wa.gov.